PTCISBIOS (12-04)
Approved for use through 7/3 1/2006. Olds 0454-0032
U.S. Petent and Tradomeric Office; U.S. DEPARTMENT OF COMMERCE.
I required to respond to a collection of information united it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-876											09 791679			
·.	_	SMALL ENTITY			oŘ.	OTHE SMAL								
	FOR	MAMBER	NAMBER FILED MAISER EXTRA		EXTRA	L	RATE (1)	L	FEE (I)		RATE (1)	+	FEE (R)	
ASIC ST CFI	FEE LINES DL = (4)					ŀ		L				+		
SEAR	CH FEE		•		<u> </u>	Ł		L		1		4		
XAM	NATION FEE.											$\perp$		
TOTA	R 1.18(M. (D) = 80) L CLAMS	<del> </del>	minus 20 •	1.		I	x -	Γ		OR	×	•		
	R 1.16(II) PENDENT CLAIM	s				1	x •	T			x	$\mathbf{I}$		
37 CI	R 1.16(bd)	li the speci	if the specification and drawings exceed 100					T				7		
	JCATION SEE.	sheets of a	sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each									-		
FEE (37 C	FR 1.16(4))	additional !	additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								1	-		
		-			1.10(8).			+				7		
MI.	TPLE DEPENDE	IT CLAMPRESE	NT (37 OFF	1.16(1)		-		╀			<u> </u>	╅		
		TOTAL	L		ŀ	TOTAL	L	<u></u>						
•	APPLE	CATION AS A	MENDE	- PART II								.co	PLIAN	
7.	17.06	:	SMÁLL ENTITY			OR	OTHER THAN SMALL ENTITY							
Ť	T	CLASES REMARKING		HOCHEST	PRESENT		RATE (\$)	١	ADDI		RATE (S	,	ADOL	
1 X	•	AFTER AMENDMENT	.'	PAID FOR	EXTRA				TIONAL FEE (8)	}		_	FEE (1)	
鱼	Total grant uses	1.5	Mirus	71	. 0		×			OR.	<u> </u>	-		
AMENDMENT	Independent er orn uses	٠ (ه	Minus	10	- &		×	7		OR	×			
鱼		icelion Size Fee (37 CFR 1.14(s))						1		]		$\vee$		
₹	FIRST PRESENTATION OF MATTIPLE DEPENDENT CLAIM (17 CFR 1.16Q)								.\	OR	L	<u> </u>		
							TOTAL ADD'L FEE	П		OR	TOTAL ADD'L FE	e	•	
				(Column 2)	(Cotumn 3)		;====	٠		_				
┡		(Column 1) CLABAS		HIGHEST	PRESENT	1	RATE (\$)	П	ADD1-	7	RATE (	<b>83</b>	ADOI-	
l ø		REMAINING AFTER	·	PREVIOUSLY	EXTRA	١	acre (s)	' <b> </b>	TIONAL FEE (I)	1.		•	FEE (1)	
富	Total	AMENDMENT	Mares	PAID FOR	- 01	1	-	_	FEE WI	┪"				
3	GT GTR LINES	<u> </u>	66nus		1.10	┨	*	긕		1	· —	_	-	
富	to que reste	<u> </u>		<u> </u>	1.14	┨	·   ×	긕		┦ᅄ	`   <u>×</u>			
3		s Fee (37 CFR 1.				1	-			٦ "				
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (\$7 OFR L18Q)					٤	TOTAL	_		٦ "	TOTAL	ce.		
1						1	ADD'LFE	£	•	ً لـ	AUU ( 1	LE	L	
	" If the entry in a	column 1 is less th Number Pervious	on the entry by Paid For	IN THES SPACE	E is less than 2	0,	octor 20°.						•	
1	oos II the Tillebeel	Mundae Pendeus:	W PERS FOR	MI ILID SLAF		•		nd In	the appropr	leta bo	in cotumn 1.	<b>L</b>	Ga (and by 8	
114	collection of into	amelian is require	d by 37 CP	R 1,10. The in a governed by it completed applic	Distillation in in				. and and least		ded to take 12	min	les to comple	

on the amount of time you require to complete this form and/or suggestions for reducing this burden, chould be sent to the Chief integration Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, chould be sent to the Chief integration of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Tradenact Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need existence in completing the form, cell 1-800-PTO-9189 and refact option 2.

## Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE \_\_\_ **TOTAL CLAIMS** SMALL ENTITY OR RATE FEE RATE FOR FEE NUMBER FILED NUMBER EXTRA BASIC FEE 150.00 OR BASIC FEE 300.00 TOTAL CHARGEABLE CLAIMS minus 20= X\$ 25= X\$50= OR INDEPENDENT CLAIMS minus 3 = X100 =MULTIPLE DEPENDENT CLAIM PRESENT X200= OR +180= If the difference in column 1 is less than zero, enter \*0\* in ∞lumn 2 OR +360≈ TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY CLAIMS HIGHEST ⋖ REMAINING NUMBER ADDI-AMENDMENT PRESENT ADDI-AFTER PREVIOUSLY EXTRA RATE TIONAL AMENDMENT RATE TIONAL PAID FOR FEE Total FEE Minus •• X\$ 25= X\$50= OR Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100 =X200= OR +180 =+360= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CUAIMS AMENDMENT B HIGHEST REMAINING NUMBER ADDI-PRESENT ADDI-AFTER PREVIOUSLY RATE TIONAL **EXTRA** AMENDMENT RATE TIONAL PAID FOR FEE FEE Total Minus X\$ 25= X\$50= Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100= X200= OR +180= +360= OR TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) · (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER ADDI-PRESENT ADDI: AFTER PREVIOUSLY TIONAL **EXTRA** RATE AMENDMENT RATE PAID FOR TIONAL FEE FEE Total Minus \*\* X\$-25= X\$50= Independent OH Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100= X200= OR +180= • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. OR +360= \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

ADDIT. FEE

OR

TOTAL